



Enter your transmittal number

W200195

Transmittal Number

Your unique Transmittal Number can be accessed online: <http://mass.gov/dep/service/online/trasmfrm.shtml> or call MassDEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

Massachusetts Department of Environmental Protection

## Transmittal Form for Permit Application and Payment

210261

DJL

12/13/07

12/13/07

12/14/07

1. Please type or print. A separate Transmittal Form must be completed for each permit application.

2. Make your check payable to the Commonwealth of Massachusetts and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three copies of this form will be needed.

Copy 1 - the original must accompany your permit application. Copy 2 must accompany your fee payment. Copy 3 should be retained for your records

4. Both fee-paying and exempt applicants must mail a copy of this transmittal form to:

MassDEP  
P.O. Box 4062  
Boston, MA  
02211

\* Note:  
For BWSC Permits,  
enter the LSP.

### A. Permit Information

1. Permit Code: 7 or 8 character code from permit instructions

BWP1W3B

2. Name of Permit Category

DEC 13 2007

3. Type of Project or Activity

PERMIT OF EXISTING FACILITY

### B. Applicant Information - Firm or Individual

1. Name of Firm - Or, if party needing this approval is an individual enter name below:

INDEPENDENT PLATING, INC.

2. Last Name of Individual

35 NEW ST

3. First Name of Individual

4. MI

5. Street Address

WORCESTER

6. City/Town

7. State

8. Zip Code

9. Telephone #

10. Ext. #

CHARLES FLANAGAN

11. Contact Person

12. e-mail address (optional)

### C. Facility, Site or Individual Requiring Approval

1. Name of Facility, Site Or Individual

INDEPENDENT PLATING, INC

2. Street Address

SAME

3. City/Town

130537

8. DEP Facility Number (if Known)

4. State

5. Zip Code

6. Telephone #

7. Ext. #

04-3007829

9. Federal I.D. Number (if Known)

10. BWSC Tracking # (if Known)

### D. Application Prepared by (if different from Section B)\*

1. Name of Firm Or Individual

2. Address

3. City/Town

4. State

5. Zip Code

6. Telephone #

7. Ext. #

8. Contact Person

9. LSP Number (BWSC Permits only)

### E. Permit - Project Coordination

1. Is this project subject to MEPA review? ☐ yes ☒ no

If yes, enter the project's EOE file number - assigned when an Environmental Notification Form is submitted to the MEPA unit:

EOEA File Number

### F. Amount Due

#### Special Provisions:

1. ☐ Fee Exempt (city, town or municipal housing authority)(state agency if fee is \$100 or less).  
There are no fee exemptions for BWSC permits, regardless of applicant status.
2. ☐ Hardship Request - payment extensions according to 310 CMR 4.04(3)(c).
3. ☐ Alternative Schedule Project (according to 310 CMR 4.05 and 4.10).
4. ☐ Homeowner (according to 310 CMR 4.02).

DEP Use Only

Permit No:

Rec'd Date:

Reviewer:

021731

\$1605.00

Check Number

Dollar Amount

Date

12.12.07